

| POSITION                  | INITIALS | ID NO. | DATE   |
|---------------------------|----------|--------|--------|
| FEE DETERMINATION         | 50       | 75316  | 9/7/00 |
| O.I.P.E. CLASSIFIER       |          | 75316  | 9/7/00 |
| FORMALITY REVIEW          |          | 60500  | 10/31  |
| RESPONSE FORMALITY REVIEW |          |        |        |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim | Final | Original | Date    |
|-------|-------|----------|---------|
| 1     | ✓     | ✓        | 3/1/02  |
| 2     |       | ✓        | 7/9/02  |
| 3     |       | ✓        | 4/4/02  |
| 4     |       | ✓        | 4/30/02 |
| 5     |       | ✓        |         |
| 6     | ✓     | ✓        | ✓       |
| 7     |       | ✓        |         |
| 8     |       | ✓        |         |
| 9     |       | ✓        |         |
| 10    |       | ✓        |         |
| 11    | ✓     | ✓        | ✓       |
| 12    |       | ✓        |         |
| 13    |       | ✓        |         |
| 14    |       | ✓        |         |
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| 16    | ✓     | ✓        | ✓       |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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